

Contact name:	
Phone number:	Fax number:

Participant information		
Participant name:		
Participant ID number:	Date of birth:	Participant's phone number:
Authorization number, if applicable:		Primary insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No
Name of carrier:	Primary insurer Participant ID:	Primary authorization number:

Provider information		
Physician name:		
Physician NPI:	Physician phone number:	Physician fax number:
Vendor name:		
Vendor NPI:	Vendor phone number:	Vendor fax number:

Codes				
Code	Formula	Order	Units per month	Billing amount

Enteral supply codes			
Code	Supply description	Units per month	Billing amount

Enteral request information			
Diagnosis:	Date of service:	Sole source of nutrition? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Administration method: <input type="checkbox"/> Pump <input type="checkbox"/> Gravity <input type="checkbox"/> Bolus <input type="checkbox"/> Oral <input type="checkbox"/> Other			
Route: <input type="checkbox"/> G-tube <input type="checkbox"/> N-G tube <input type="checkbox"/> J-Jejunostomy? <input type="checkbox"/> Low profile <input type="checkbox"/> Other			
Height:	Weight:	Prealbumin:	
Date last LOMN/script supplied:		Referred to WIC? <input type="checkbox"/> Yes <input type="checkbox"/> No	

**CLINICAL NOTES TO SUPPORT THE MEDICAL NEED OF THIS SERVICE ARE REQUIRED.
ALL FIELDS MUST BE COMPLETED FOR REQUEST TO BE PROCESSED.**

Important payment notice:

Please note that reimbursement for all rendering network providers subject to the ordering/referring/prescribing (ORP) requirement for an approved authorization is determined by satisfying the mandatory requirement to have a valid Pennsylvania Medical Assistance (MA) Provider ID. Effective January 1, 2018, any claim submitted by rendering network providers that are subject to the ORP requirement will be denied when billed with the NPI of an ORP provider that is not enrolled in MA.

To check the MA enrollment status of the practitioner ordering, referring, or prescribing the service you are providing, visit the DHS provider look-up portal at: <https://promise.dpw.state.pa.us/portal/Default.aspx?alias=promise.dpw.state.pa.us/portal/provider>.